



FH  
[REDACTED]

**STATE OF WISCONSIN**  
**Division of Hearings and Appeals**

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

MNP/152798

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**PRELIMINARY RECITALS**

Pursuant to a petition filed October 11, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on November 14, 2013, at Milwaukee, Wisconsin.

NOTE: This hearing was originally classified as a general Medicaid case (MGE). However, at the hearing, it was discovered that Petitioner was concerned about the non-payment of certain services. Consequently, this case has been reclassified as a Medicaid Non-payment case (MNP) and the Department of Health Services was notified of the issue.

Margaret E. Algar and David Stepien, from the Department of Health Services responded with a string of e-mails that has been marked as Exhibit 7. A copy of the Exhibit was sent to Petitioner with this decision.

In addition, the record was held open for the day to allow Milwaukee Enrollment Services to provide a copy of a notice sent to Petitioner on June 13, 2012 and Member Information showing that Petitioner had Medicaid coverage from May 1, 2012 until October 31, 2012. The documents have been marked as Exhibits 5 and 6 and they have been entered into the record.

The issue for determination is whether Medicaid correctly denied payment of a bill for services rendered between May 11, 2012 and May 31, 2012.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
1 West Wilson Street  
Madison, Wisconsin 53703

By: Katherine May, HSPC, Sr.  
Milwaukee Enrollment Services  
1220 W. Vliet St.

Milwaukee, WI 53205

ADMINISTRATIVE LAW JUDGE:  
Mayumi M. Ishii  
Division of Hearings and Appeals

### **FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. On September 10, 2013, Aurora Health Care sent Petitioner a bill for \$1,686.00 for services rendered between May 11, 2012 and May 31, 2012. The bill did not specify what those services were. (Exhibit 1)
3. Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on October 11, 2013. (Exhibit 1)
4. Petitioner was open and eligible for Medicaid coverage between May 1, 2012 and October 31, 2012. (Exhibit 6)
5. Aurora Health Care coded the bill incorrectly, resulting in the non-payment of services that are the subject of the September 10, 2013 bill. The Department of Health Services is working with Aurora Health Care to rectify the situation. (Exhibit 7)

### **DISCUSSION**

In cases where the Medicaid program refuses payment of good or services rendered Medicaid applicants and participants have the right to appeal under Wis. Admin. Code §104.01(5)(a) 1., which states, “Applicants and recipients have the right to a fair hearing in accordance with procedures set out in this subsection when aggrieved by action or inaction of the agency or the department. This subsection does not apply to actions taken by a PRO.” (Per Wis. Admin. Code §101.03.01(135), a PRO is a Peer Review Organization.)

In the case at hand, Petitioner is appealing a September 10, 2013, medical bill for services rendered by Aurora Health Care between May 11, 2012 and May 31, 2012.

Medical providers, like Aurora Health Care, must submit claims “in accordance with the claims submission requirements, claim forms instructions and coding information provided by the department.” §DHS 106.03(2), Wis. Admin. Code. The Division of Health Care Financing must deny payment to any provider who fails to meet this requirement. §DHS 107.02(1)(a) and (2)(h), Wis. Admin. Code. It is up to the petitioner and provider to prove that they have met the medical assistance requirements. Because the hearing record contains no documents that prove that the provider has submitted proper requests, I find that the Department of Health Services correctly denied payment for the services that form the basis of this dispute.

I note that the provider’s attempt to collect payment from the petitioner for a service normally covered by MA violates the MA program’s rules if the payment was rejected because of the provider’s error. Wis. Admin. Code §106.04(3).

### **CONCLUSIONS OF LAW**

Wisconsin Medicaid correctly denied payment of the September 10, 2013 bill.

**THEREFORE, it is**

**ORDERED**

That the petition is dismissed.

**REQUEST FOR A REHEARING**

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

**APPEAL TO COURT**

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

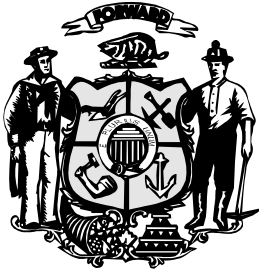
For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,  
Wisconsin, this 19th day of December, 2013.

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\sMayumi M. Ishii  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

Brian Hayes, Administrator  
Suite 201  
5005 University Avenue  
Madison, WI 53705-5400

Telephone: (608) 266-3096  
FAX: (608) 264-9885  
email: [DHAmail@wisconsin.gov](mailto:DHAmail@wisconsin.gov)  
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on December 19, 2013.

Division of Health Care Access And Accountability